



Charitable Gift Annuity Application

Thank you for taking a few minutes to complete the following form. If you have any questions, or would like us to send you a copy of this form, please do not hesitate to call us via toll-free telephone at 866-803-0389 or email GregBaker@rcgf.org.

Print out and complete this Application form, providing all the requested information including a W-9 and a copy of the driver's license or birth certificate for **each donor and annuitant**. Please fax to 877-222-1829 or send the completed copy to:

Renaissance Charitable Foundation Inc.
6100 W. 96th Street, Suite 105
Indianapolis, IN 46278

FIRST ANNUITANT INFORMATION

Annuitant Name: _____	Phone: _____
Street Address: _____	Email: _____
City: _____	Birthdate: _____
State and Zip: _____	SSN: _____
Relationship to First Donor: _____	Gender: _____

SECOND ANNUITANT INFORMATION

Annuitant Name: _____	Phone: _____
Street Address: _____	Email: _____
City: _____	Birthdate: _____
State and Zip: _____	SSN: _____
Relationship to First Donor: _____	Gender: _____

GIFT INFORMATION

Describe the Asset: _____	FMV: \$ _____
_____	Basis: \$ _____

If Two Annuitants, payments will be made:

Jointly, OR

At first, only to the first annuitant and then only to the second annuitant.

Payment Frequency:

Quarterly

SemiAnnual

Annual

Please select one: The donor wants a higher income tax deduction. OR The annuitant wants payments that are more tax-advantaged.



DONOR INFORMATION

Donor Name: _____ Phone: _____
Street Address: _____
City: _____
State and Zip: _____
Relationship to
First Annuitant: _____

SECOND DONOR INFORMATION

Donor #2 Name: _____ Phone: _____
Street Address: _____
City: _____
State and Zip: _____
Relationship to
First Annuitant: _____

ADVISOR INFORMATION

Advisor Name: _____ Phone: _____
Street Address: _____ Email: _____
City: _____
State and Zip: _____

I (we) intend to create a charitable gift annuity with Renaissance Charitable Foundation Inc. (Foundation). I (we) understand that this document is an application and not a gift annuity contract. I (we) further understand that I am (we are) making a charitable gift and that this gift will be **irrevocable** once it has been accepted by the Foundation. The lifetime annuity payments made to each annuitant named in the signed CGA Contract will be based on the value of the assets when accepted by the Foundation.

Signature of Donor #1

Signature of Donor #2

Please note that Renaissance Charitable Foundation Inc. cannot issue Charitable Gift Annuity contracts in all states. For a list of the current states, please see www.RCGF.org/docs/RCF-CGA-map.pdf.